



ATTORNEY DOCKET No. TB 104IA-US 1915/13971US02

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

CERTIFICATE OF MAILING

Applicants:

Sander, Tom, *et al.*

U.S. Serial No.: 09/701,933

Filed: August 20, 2001

For: "ELONGATED CORTICAL BONE
IMPLANT" (AS AMENDED)

Group Art Unit: 3738

Examiner: Bruce Edward Snow

I hereby certify that this paper (and all papers referred to herein) is being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

December 29, 2003

Michael B Harlin

Michael B. Harlin

Registration No. 43,658

Attorney for Applicants

RESPONSE UNDER 37 C.F.R. § 1.114

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Sir:

In response to the Official Action of 09/29/03, finally rejecting all claims (claims 59-71), for which a response was filed 11/23/03 proffering an amendment to the specification and claim 65, which was denied in the Advisory Action of 12/10/03, the Applicants hereby request continued examination under 37 C.F.R. § 1.114. In requesting continued examination, the Applicants request that the Examiner enter the amendments to the specification and to claim 65 as submitted in the Applicants' Second Response Under 37C.F.R. § 1.116, filed 11/23/03.

This document is accompanied by a check in the amount of \$770.00 to cover the fee under 37 C.F.R. § 1.17(e). In the event that any additional fee is due as a result of filing this paper, the Assistant Commissioner is hereby authorized to charge such fees to deposit account No. 13-0017 in the name of McAndrews, Held & Malloy.

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Respectfully submitted,

McANDREWS, HELD & MALLOY, LTD.

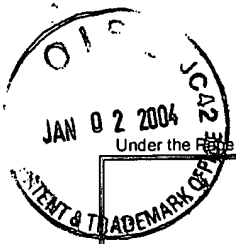
By:

A handwritten signature in cursive script, reading "Michael B. Harlin", written over a horizontal line.

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Dated: December 29, 2003

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/701,933
		Filing Date	08/20/01
		First Named Inventor	Tom Sander, et al.
		Group Art Unit	3738
		Examiner Name	Bruce Edward Snow
		Attorney Docket Number	1915/13971US02
Total Number of Pages in This Submission		4	

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached - \$770.00 <input checked="" type="checkbox"/> Response Under 37 C.F.R. §1.114 <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO 1449/08A with references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) (sheets) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Reply postcard
Remarks		RECEIVED JAN 08 2004 TECHNOLOGY CENTER

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Michael B. Harlin, Reg. No. 43,658 McAndrews Held & Malloy, Ltd.		
Signature	<i>Michael B Harlin</i>		
Date	December 29, 2003		

CERTIFICATE OF MAILING

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Name (Print/type)	Michael B. Harlin	Registration No. (Attorney/Agent)	43,658
Signature	<i>Michael B Harlin</i>	Date	12/29/03



PTO/SB/17 (11-00)

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FEE TRANSMITTAL for FY 2004 Patent Fees are subject to annual revision.		Complete if Known	
		Application Number	09/701,933
		Filing Date	08/20/01
		First Named Inventor	Tom Sander, et al.
		Examiner Name	Bruce Edward Snow
Group Art Unit		3738	
TOTAL AMOUNT OF PAYMENT		(\$)770.00	
		Attorney Docket No.	1915/13971US02

METHOD OF PAYMENT		FEE CALCULATION (continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		3. ADDITIONAL FEES			
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other					
FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing Fee	
1002	340	2002	170	Design filing Fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1) (\$)					
2. EXTRA CLAIM FEES					
Total Claims <input type="text"/> - 20** = <input type="text"/> x <input type="text"/> = <input type="text"/>					
Independent Claims <input type="text"/> - 3** = <input type="text"/> x <input type="text"/> = <input type="text"/>					
Multiple Dependent <input type="text"/> = <input type="text"/>					
Large Entity Small Entity					
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
1201	86	2201	43	Independent claims in excess of 3	
1203	290	2203	145	Multiple dependent claim, if not paid	
1204	86	2204	43	**Reissue independent claims over original patent	
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)					
*or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid			
		SUBTOTAL (3) (\$)770.00			

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Michael B. Harlin	Registration No. (Attorney or Agent)	43,658	Telephone	312/775-8000
Signature	<i>Michael B. Harlin</i>	Date	December 29, 2003		

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